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PTO/SB/21 (08-00)

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## **TRANSMITTAL FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	09/802,797		
Filing Date	Mar 09, 2001		
First Named Inventor	Randall		
Group Art Unit	3713		
Examiner Name	JONES, SCOTT E		
Attorney Docket Number	MS1-768US		

			ENCLOSURES	(check	all that apply)		
Fee Transmittal Form	n		Assignment Papers (for an Application)		After Allowance Communication to Group		
Fee Attached			Drawing(s)	Sheets	Appeal Communication to Board of Appeals and Interferences		
Amendment / Reply			Licensing-related Papers		Appeal Communication to Group		
After Final			Petition		Proprietary Information		
Affidavits/dec	Affidavits/declaration(s)		Petition to Convert to a Provisional Application	Status Letter			
Extension of Time Request  Express Abandonment Request  Information Disclosure Statement			Power of Attorney, Revoc Change of Corresponden Address	ondence	Other Enclosure(s) (please identify below):		
			Terminal Disclaimer  Request for Refund		PTO Form 1449; 8 cited references; return postcard		
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ander or or to	( 1.52 or 1.55						
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT							
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or Individual name	Steven R. Sponseller, Reg. No. 39,384						
Signature Ster Sponsell							
Date	1-28-		/				
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PTO/SB/17 (10-03)
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EE TRAN	CRAITT A I	ਸ਼ਵਸ ਸਭਾਚਰ Complete if Known					
FEE IRAN	DIVITIAL	Application Number	09/802,797				
for FY	200 <i>4</i>	Filing Date	Mar 09, 2001				
Effective 10/01/2003. Patent fees are		First Named Inventor	Randall				
-		Examiner Name	JONES, SCOTT E				
Applicant claims small entity status. See 37 CFR 1.27		Art Unit	3713				
TOTAL AMOUNT OF PAYMENT	(\$) 180.00	Attorney Docket No.	MS1-768US				

METH	OD OF PAY	MENT (check all that apply)	FEE CALCULATION (continued)					
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Account Name	Lee	e & Hayes, PLLC	1032	30	2002	23	cover sheet	
	authorized to:	: (check all that apply)	1053	130	1053		Non-English specification	
	(s) indicated belo	<del></del>		2,520	1812		For filing a request for ex parte reexamination	<del></del>
Charge any	additional fee(s	i) or any underpayment of fee(s)	1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
Charge feet	(s) indicated belo	ow, except for the filing fee	1805	1,840*	1805	1.840*	Requesting publication of SIR after	
to the above-ide	entified deposit	account.		·		•	Examiner action	
	FEE CA	ALCULATION	1251	110	2251	55	Extension for reply within first month	
1. BASIC FI	LING FEE		1252	420	2252	210	Extension for reply within second month	i
Large Entity S		For Bold	1253	950	2253	475	Extension for reply within third month	
	<u>Fee Fee F</u> Code (\$)	Fee Description Fee Paid	1254	1,480	2254	740	Extension for reply within fourth month	
1001 770	2001 385	Utility filing fee	1255	2,010	2255	1,005	Extension for reply within fifth month	
1002 340	2002 170	Design filing fee	1401	330	2401	165	Notice of Appeal	
1003 530	2003 265	Plant filing fee	1402	330	2402	165	Filing a brief in support of an appeal	
1004 770	2004 385	Reissue filing fee	1403	290	2403	145	Request for oral hearing	
1005 160	2005 80	Provisional filing fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding	
	SI	UBTOTAL (1) (\$) 0.00	1452	110	2452	55	Petition to revive - unavoidable	
			1453	1,330	2453	665	Petition to revive - unintentional	
2. EXTRA C	LAIM FEES	FOR UTILITY AND REISSU	E 1501	1,330	2501	665	Utility issue fee (or reissue)	
		Extra Claims below Fee Pai	<b>d</b> 1502	480	2502	240	Design issue fee	
Total Claims Independent	-20**		1503	640	2503	320	Plant issue fee	
Claims	-3**	*	1460	130	1460	130	Petitions to the Commissioner	
Multiple Deper	ident	L] <b>-</b>	1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
Large Entity Fee Fee	Small Entity Fee Fee	For Donorinkian	1806	180	1806		Submission of Information Disclosure Stmt	180
Code (\$)	Code (\$)	Fee Description	8021	40	8021	40	Recording each patent assignment per	
1202 18	2202 9	Claims in excess of 20	1809	770	2809	205	property (times number of properties) Filing a submission after final rejection	
1201 86	2201 43	Independent claims in excess of 3	1609	770	2009	300	(37 CFR 1.129(a))	
1203 290	2203 145	Multiple dependent claim, if not paid	1810	770	2810	385	For each additional invention to be	
1204 86	2204 43	** Reissue independent claims					examined (37 CFR 1.129(b))	_
4007 45		over original patent	1801		2801		Request for Continued Examination (RCE)	
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent	1802	900	1802	900	Request for expedited examination of a design application	
	0115	[in: 0.00	Other	fee (sp	ecify)			
**or number previously paid, if greater; For Reissues, see above				ee Paid SUBTOTAL (3) (\$) 180.0	00			
SUBMITTED E							(Complete (if applicable))	
CODMITTED	7						(Oompiete (ii applicabie))	

SUBMITTED BY				(Complete	(if applicable))
Name (Print/Type)	Steven R. Sponseller	Registration No. (Attomey/Agent)	39,384	Telephone	(509) 324-9256
Signature	the Sponsell			Date	1-28-04

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